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36814 7590 01/25/2006

NASTECH PHARMACEUTICAL COMPANY INC
3450 MONTE VILLA PARKWAY
BOTHELL, WA 98021-8906

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Janice L. Goebel	(Depositor's name)
Janice L. Goebel	(Signature)
4/25/06	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/810,020	03/26/2004	Henry C. Lin	04-11US	7744

TITLE OF INVENTION: METHODS FOR MANIPULATING UPPER GASTROINTESTINAL TRANSIT, BLOOD FLOW, AND SATIETY, AND FOR TREATING VISCERAL HYPERALGESIA

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	04/25/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
SWARTZ, RODNEY P	1645	424-009200

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Peter J. Knudsen2 Seth D. Levy

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Cedars-Sinai Medical Center
Burns and Allen Research Center

Los Angeles, CA, US

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies _____

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 562769 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

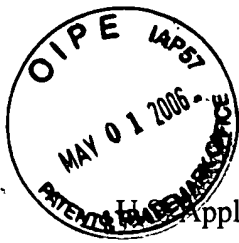
Date April 25, 2006

Typed or printed name

Peter J. KnudsenRegistration No. 40,682

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application Serial Number: 10/810,020 Confirmation Number: 7744

Title: METHODS FOR MANIPULATING UPPER GASTROINTESTINAL TRANSIT, BLOOD FLOW, AND SATIETY, AND FOR TREATING VISCERAL HYPERALGESIA

Attorney Docket Number: 04-11US, 0189

ISSUE FEE TRANSMITTAL LETTER

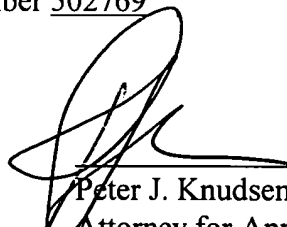
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Dear Sir:

Enclosed are the following:

1. X Issue Fee Transmittal (PTOL-85).
2. X The Director is hereby authorized to charge the authorized fees of \$1,700, or credit overpayment, to Deposit Account Number 502769

April 25, 2006
Date



Peter J. Knudsen Esq.
Attorney for Applicants
Reg. No. 40,682

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I hereby certify that this is being faxed (2 sheets) to (571) 273-2885, and is being deposited with the U.S. Postal Service first class mail on the date indicated below and is addressed to:

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